15915 U.S. PT(

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Moris TOPAZ

Title:

BIOCOMPATIBLE, INJECTABLE AQUEOUS SOLUTION FOR

USE IN ULTRASOUND ENERGY ASSISTED SURGERY

Prior Appl. No.:

09/478,363

Prior Appl. Filing Date:

January 6, 2000

Examiner:

Unassigned

Art Unit:

Unassigned

CONTINUING PATENT APPLICATION TRANSMITTAL LETTER

Mail Stop PATENT APPLICATION Commissioner for Patents PO Box 1450 Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is a:

[] Continuation [X] Division [] Continuation-In-Part (CIP)

of the above-identified copending prior application in which no patenting, abandonment, or termination of proceedings has occurred. Priority to the above-identified prior application is hereby claimed under 35 U.S.C. § 120 for this continuing application. The entire disclosure of the above-identified prior application is considered as being part of the disclosure of the accompanying continuing application and is hereby incorporated by reference therein.

[X] Applicant claims small entity status under 37 CFR 1.27.

Enclosed are:

- [X] Specification, Claim(s), and Abstract (12 pages).
- [X] Informal drawings (3 sheets, Figures 1-3).
- [X] Copy of Declaration and Power of Attorney (3 pages) from parent application.

[X] Application Data Sheet (37 CFR 1.76) (2 pages).

The filing fee is calculated below:

	Claims as Filed		Included in Basic Fee		Extra Claims		Rate \$770.00		Fee Totals \$770.00
Basic Fee Total	25	-	20	=	5	x	\$18.00	=	\$90.00
Claims: Independ	4	-	3	_ =	1	x	\$86.00	=	\$86.00
ents: If any Mu	ltiple Dep	end	lent Claim(s) p	resent:	+ SU	\$290.00 JBTOTAL:	=	\$290.00 \$1236.00
[X]	Sn	nall	Entity Fees	s Ap	ply (subtr TOTA	act 1/	% of above): LING FEE:	=	\$618.00 \$618.00

- A check in the amount of \$618.00 to cover the filing fee is enclosed. [X]
- The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any [X] overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

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